# Michigan Long-Term Care Conference Workshop: Defining and Achieving Quality MI Choice Person Focused Quality Management (QM) Collaboration

#### What has the QM Collaboration done? (History and accomplishments)

Michigan enhanced its quality strategy (a quality management plan) with meaningful contributions from consumers and their peers who participated in monthly meetings with the Michigan Department of Community Health (DCH) and provider staff from March, 2004 – September 2005. A leadership group composed of seven consumers and their peers and seven providers organized formally into the MI Choice Person Focused Quality Management Collaboration to work on developing a person focused plan. Collaboration meetings were planned and co-facilitated by DCH and the Michigan Disability Rights Coalition (MDRC).

The purpose of the QM Collaboration is to include consumers and their peers in the development, discussion and review of quality management activities for the MI Choice Medicaid Waiver Program. The Collaboration provides a venue (a location, place or setting) where providers, consumers and their peers review and discuss measured provider performance and participant outcomes and recommend improvements that need to be made in the Michigan Medicaid service delivery system. The Collaboration also provides consumers and their peers with an opportunity to provide meaningful input during the implementation and planning of person centered planning and self determination options. Other first year achievements of the Collaboration include:

- The QM Collaboration adopted a quality outcome review methodology that examines performance outcomes (data) drawn from the Michigan Minimum Data Set for Home Care (MDS-HC) Assessment System called Quality Indicators (QIs). 20 MDS-HC QIs are used to monitor individual participant health and functional outcomes. It works like this: During a quality planning cycle, one or more MDS-HC QIs are selected as goal areas to work on improving. The Collaboration selected the incidence of intense daily pain experienced by participants to work on reducing during the two year quality planning period beginning October 1, 2005. Interventions and strategies are designed to reduce the incidence of intense daily pain. Interventions/strategies that are found to improve participant outcomes based on data are shared with MI Choice providers and documented as "Best Practices."
- The QM Collaboration provided advisory oversight to the PES Project.
   MDRC manages a project that involves consumers and their peers
   interviewing MI Choice Participants in their homes to test the CMS Participant
   Experience Survey (PES). The PES survey focuses on how participants
   perceive their services are being delivered along the four CMS Quality
   Framework domains of 1) Access to Care 2) Choice and Control 3) Respect
   and Dignity and 4) Community Integration. MDRC is testing and evaluating
   the usefulness of the 33 Quality Indicators that are derived from the PES

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instrument. Asking consumers to furnish providers with information about how they perceive their services are being delivered is one discovery method that we will use in identifying issues, problems and concerns in the service system that are in need of remediation or improvement.

- Collaboration members participated in the review and updating of contract requirement documents that describe minimum standards for the operation of the waiver program. Members provided recommendations for person focused edits. The quality strategy includes updating service standards and contract requirements as routinely needed to assure the health and welfare of waiver participants.
- The Collaboration provided advisory oversight to the development of new measurement protocols to ascertain Quality of Life along dimensions deemed most significant to participant consumers. Research guidance was provided by Dr. Jim Conroy, Ph. D., Center for Outcome Analysis, Philadelphia and Dr. Brant Fries, Ph. D., University of Michigan, Institute of Gerontology, Ann Arbor. These new participant outcome measures called Participant Outcome Status Measures (POSM) are the basis for add on items that will be administered in tandem with the MDS-HC assessment instrument. The package will be used to measure quality of life by looking at participant experiences with service delivery and personal outcomes. The Participant Outcome Status Measures (POSM), can be viewed at the following website: <a href="http://www.dynsinc.com/posm">http://www.dynsinc.com/posm</a>

## Michigan Long-Term Care Conference Workshop: Defining and Achieving Quality Generally, what does the collaboration do?

- 1) The Collaboration provides a venue (a location, place or setting) that brings providers and consumers and their peers together to:
  - a) review a variety of quality outcomes, measured provider performance and participant outcomes;
  - b) identify problem/issue areas in the MI Choice Waiver Program that need remediation or improvement;
  - c) recommend strategies for remediation or improvement of service delivery problems/issues;
  - d) recommend improvements that need to be made in the Michigan Medicaid service delivery system;
  - e) focus attention on policy and practice issues that we need to give more attention to i.e., bridge gap between quality and policy;
  - f) help bring focus to quality questions and issues;
  - g) establish one open forum for the exchange of ideas and best practices.
- 2) The Collaboration educates its member and others about quality management activities, i.e.:
  - a) the issues, problems, concerns, policies that must be addressed to assure that services are delivered in a quality manner in the MI Choice Waiver Program;
  - b) the language of quality management;
  - c) person centered planning and self determination; and
  - c) the things that are most important to participants regarding the services that they receive.

A variety of experts, researchers and other individuals contribute to providing educational presentations to the Collaborative for the purpose of increasing our understanding about what goes into making good service outcomes occur for participants.

- 3) The Collaboration is one forum designed to increase meaningful informed consumer involvement via face to face meetings in publicly funded service delivery systems. The State QM Collaboration helps establish local (or regional) collaborations including training of members on quality activities. Members from local collaborations might be asked to serve on the state collaboration.
- 4) Local collaborations are started to include consumers and their peers as a central part of developing evaluation tools and analyzing quality data with local providers. Consumer representatives in local areas might be involved in the development and implementation of the monitoring components that are designed to review quality management activities.

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### Specifically, what do members of the Collaborations do?

- 1) Attend meetings, either monthly or quarterly. Local collaborations may decide to meet monthly during start-up;
- 2) Learn about quality, in general and in the MI Choice Waiver Program;
- 3) Participate in quality discussions, offer opinions based on your perceptions;
- 4) Review quality outcome data, learn to review quality data;
- 5) Review and recommend updates to MI Choice contract requirements;
- 6) Provide oversight advisory for the testing of the CMS Participant Experience Survey (PES) and the development of new quality of life measures called Participant Outcome Status Measures (POSM). Review PES evaluation report. Make a recommendation to DCH regarding the continued use (or not) of PES as a consumer interviewing instrument;
- 7) Select priority goals and quality indicators for the MI Choice QM Strategy.

We believe that the strength of our endeavor is our joint collaborations among members (providers, consumers, advocates and caregivers). Our efforts are centered on making quality improvements in the MI Choice Waiver Program for the benefit of all Participants.